

Tax Amnesty 2015 Expungement

State Form 55926 (9-15)

*Instructions: Complete this Tax Amnesty 2015 Expungement Request Form in its entirety. Incomplete forms will be considered invalid, and invalid forms will receive no consideration. This form should be completed and returned to the Indiana Department of Revenue **on or before September 16, 2016**. This form should not be completed and returned to the department until all outstanding liabilities, including Tax Amnesty 2015 liabilities, have been paid in full. If we receive your form before all outstanding liabilities are paid in full, your form will not be processed. The department will review and approve or deny your request within 180 days of your submission.*

Taxpayer Name: _____

Taxpayer Mailing Address: _____

Tax Warrant Number: _____

Note: If you have more than one tax warrant, please provide only one of your tax warrant numbers above.

Amnesty Case ID # (if applicable): _____

Taxpayer Identification Number: _____

Note: This is a 10-digit number. Please do not provide a social security number.

Date by which your Tax Amnesty 2015 case has been paid in full (MM/DD/YYYY): ____/____/____

Are you current (filing and remittance) on all other taxes due to date? ☐ Y ☐ N

Disclaimer

Expungement of tax warrants will be granted at the sole discretion of the department. An expungement will **not** be granted if:

- This form is incomplete upon submission.
- This form is received before all Tax Amnesty 2015 eligible liabilities are paid in full.
- This form is completed and returned to the department after September 16, 2016.
- Taxpayer is not current on all subsequent tax filings and/or has outstanding tax liabilities.
- Taxpayer warrant was issued based on the taxpayer's fraudulent, intentional or reckless conduct.

By signing this form, I acknowledge I have read and agree to the terms stated above.

Sign

Today's Date

Please return this completed form to the department by mail on or before **September 16, 2016** to:
P.O. Box 6031 Indianapolis, IN 46206-6031.

If you have questions about your account, contact the department at 1-844-TAXESIN (1-844-829 3746) or visit our website at www.taxamnesty.in.gov for more information.